



Resim 1. Iron pipe that has sunk to the left flank



Resim 2. Iron pipe that has protruded through the proximal of the right hip (A, B)

Abdominal trauma occurs due to blunt or penetrating mechanisms and is responsible for 15-20% percent of all deaths due to trauma. The most important thing in penetrating injuries is whether the agent that the caused injury traverse to the retroperitoneum. Penetrating injuries to the posterior abdominal if not superficial are accepted as penetrating peritoneum and requires surgery. As in our patient, injures that penetrating the posterior abdomen but not causing any solid or hollow organ injuries in the abdominal cavity are very rare.

Thirty-five-year-old male patient was brought to our emergency department because he had fallen on iron pipes from approximately 10 meters height and one of the iron pipes had stuck into him through posterior abdominal region. The patient was conscious, vital signs were stable and patient's general condition was medium in the Emergency room. In physical examination, the patient was lying supine with the iron pipe which was approximately in 8-10 cm diameter, 80 cm length, penetrated into the left posterior region of abdomen and protruded through the proximal of the right hip. sink to the left flank which had. (Figures 1,2,3). Breath sounds were diminished in the lower zones of the left lung. Other physical examination findings were normal. In complete blood count, hemoglobin was 10 g / dl, hematocrit was 34%, respectively. Biochemical parameters were normal. Cranial cerebral and cervical tomographies were normal. Fractures in left 11-12th ribs and minimal hemothorax were detected on thoracic computed tomography. Abdominal and pelvic computed tomography could not be evaluated adequately because of the artifact made by iron. But there was no free fluid or solid organ injury. Patient was operated and the iron pipe was taken out. The patient was discharged on the 11th day of admission.